

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2000 JUN 19 P 12:15

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) National Restaurant Association Political Action Committee		2. FEC IDENTIFICATION NUMBER C 0000 3784
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1200 17th Street, NW		
CITY, STATE and ZIP CODE Washington, DC 20036		
3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)		

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year End Report
 July 31 Mid Year Report (Non-election Year Only)
 Termination Report

Monthly Report Due On:

- February 20 June 20 October 20
 March 20 July 20 November 20
 April 20 August 20 December 20
 May 20 September 20 January 31

- Twelfth day report preceding _____
(Type of Election)
election on _____ in the State of _____
- Thirtieth day report following the General Election on _____
in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period	05/01/00 through 05/31/00		
6. (a) Cash on Hand January 1, 2000			\$ 224,537.89
(b) Cash on Hand at Beginning of Reporting Period		\$ 149,547.14	
(c) Total Receipts (from Line 19)		\$ 67,317.78	\$ 126,205.14
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 215,864.90	\$ 349,743.03
7. Total Disbursements (from Line 20)		\$ -5,000.00	\$ 127,876.13
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 221,864.90	\$ 221,864.90
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		\$ 0.00	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20483 Toll Free 800-424-9630 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		\$ 0.00	

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Lee Culpapper

Signature of Treasurer

Lee Culpapper

Date

6-16-00

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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FEC FORM 3X

(revised 9/93)

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE	REPORT COVERING PERIOD		
National Restaurant Association Political Action Committee	FROM	TO	
	05/01/00	05/31/00	
	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	47,650.00	88,950.00	11(a)(1)
ii. Unitemized	5,508.38	12,186.85	11(a)(2)
iii. Total (add i and ii) >	53,158.38	109,136.85	11(a)(3)
b. Political Party Committees	0.00	0.00	11(b)
c. Other Political Committees (such as PACs)	13,403.16	13,403.16	11(c)
d. Total Contributions (add a ii, b and c) >	66,559.54	122,620.01	11(d)
12. Transfers From Affiliated/Other Party Committees	0.00	0.00	12
13. All Loans Received	0.00	0.00	13
14. Loan Repayments Received	0.00	0.00	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	519.22	619.22	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	1,000.00	16
17. Other Federal Receipts (Dividends, Interest, etc.)	239.00	1,165.91	17
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	67,317.76	125,205.14	19
20. Total Federal Receipts (subtract line 18 from line 19) >	67,317.76	125,205.14	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0.00	0.00	21(a)(1)
ii. Non-Federal Share	0.00	0.00	21(a)(2)
b. Other Federal Operating Expenditures	0.00	42.00	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	0.00	42.00	21(c)
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	-5,000.00	108,876.13	23
24. Independent Expenditures (use Schedule E)	0.00	0.00	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00	25
26. Loan Repayments Made	0.00	0.00	26
27. Loans Made	0.00	0.00	27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees	0.00	2,860.00	28(a)
b. Political Party Committees	0.00	0.00	28(b)
c. Other Political Committees (such as PACs)	0.00	0.00	28(c)
d. Total Contribution Refunds (add a, b and c) >	0.00	2,860.00	28(d)
29. Other Disbursements	0.00	16,300.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	-5,000.00	127,878.13	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	-5,000.00	127,878.13	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)	66,559.54	122,620.01	32
33. Total Contribution Refunds (from line 28d)	0.00	2,860.00	33
34. Net Contributions (other than loans) (subtract line 33 from line 32)	66,559.54	119,660.01	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	0.00	42.00	35
36. Offsets to Operating Expenditures (from line 15)	519.22	519.22	36
37. Net Operating Expenditures (subtract line 35 from line 36) >	-519.22	-477.22	37

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 1 OF 1
FOR LINE NUMBER 11 c

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
National Restaurant Association Political Action Committee

<p>A. Full Name, Mailing Address and ZIP Code Advantica Restaurant Group, Inc. PAC 203 East Main Street Spartanburg, SC 29319</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 3,403.16</p>	<p>Date (month, day, year)</p> <p>05/24/00</p>	<p>Amount of Each Receipt this Period</p> <p>3,403.16</p>
<p>B. Full Name, Mailing Address and ZIP Code Carlson Restaurants Worldwide PAC P.O. Box 809062 Dallas, TX 75380-9062</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 5,000.00</p>	<p>Date (month, day, year)</p> <p>05/24/00</p>	<p>Amount of Each Receipt this Period</p> <p>5,000.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Darden Restaurants Good Govt. Fund Post Office Box 593330 Orlando, FL 32859-3330</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 5,000.00</p>	<p>Date (month, day, year)</p> <p>05/24/00</p>	<p>Amount of Each Receipt this Period</p> <p>5,000.00</p>
<p>D. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>E. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>F. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>G. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>SUBTOTAL of Receipts This Page (optional)</p>			<p>13,403.16</p>
<p>TOTAL This Period (last page this line number only)</p>			<p>13,403.16</p>

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Deleted Summary Page

PAGE 1 OF 7
FOR LINE NUMBER 11 a i

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NAME OF COMMITTEE (In Full)
National Restaurant Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code Rob Halmsen 2400 17th Street Greeley, CO 80631-5008	Name of Employer Potato Brumbaugh's, Inc., /Colorado Grill Occupation Restaurateur	Date (month, day, year) 05/01/00	Amount of Each Receipt this Period 325.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 325.00	
B. Full Name, Mailing Address and ZIP Code John D. Ziegler 7373 South Alton Way Englewood, CO 80112	Name of Employer Jackson's All-American Sports Grills Occupation Restaurateur	Date (month, day, year) 05/01/00	Amount of Each Receipt this Period 600.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1,100.00	
C. Full Name, Mailing Address and ZIP Code Thomas Walls 1801 Broadway Denver, CO 80202-3800	Name of Employer Trinity Management Corp. Occupation Restaurateur	Date (month, day, year) 05/01/00	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1,000.00	
D. Full Name, Mailing Address and ZIP Code Bob Leonard 2655 NE 189th Street N. Miami Beach, FL 33180-2605	Name of Employer FMS Management/HOP Occupation Restaurateur	Date (month, day, year) 05/01/00	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1,000.00	
E. Full Name, Mailing Address and ZIP Code Al Seldenfeld 6650 E. Euclid Place Englewood, CO 80111-4507	Name of Employer Data Host Corporation Occupation Restaurateur	Date (month, day, year) 05/01/00	Amount of Each Receipt this Period 1,300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1,300.00	
F. Full Name, Mailing Address and ZIP Code Christlaine R. Ricchi 1220 18th Street, NW Washington, DC 20036	Name of Employer I Ricchi Restaurant Occupation Restaurateur	Date (month, day, year) 05/01/00	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 500.00	
G. Full Name, Mailing Address and ZIP Code John Bean P.O. Box 709 104 1/2-3rd St., South Columbus, MS 39703	Name of Employer University Management/Harveys Restaurants Occupation Restaurateur	Date (month, day, year) 05/03/00	Amount of Each Receipt this Period 2,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 2,000.00	

SUBTOTAL of Receipts This Page (optional) **6,725.00**

TOTAL This Period (last page this line number only).....

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 2 OF 7
FOR LINE NUMBER 11a1

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NAME OF COMMITTEE (In Full)
National Restaurant Association Political Action Committee

<p>A. Full Name, Mailing Address and ZIP Code Mike Kull 9656 Bluegrass Pkwy. Suite 200 Louisville, KY 40299</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Dairy Queen Corporate Stores</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 05/03/00</p>	<p>Amount of Each Receipt This Period 500.00</p>
<p>B. Full Name, Mailing Address and ZIP Code DeVere "Jerry" Burtenshaw 1500-114th Avenue, SE Suite 106 Bellevue, WA 98004</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer ABC Services, Inc.</p> <p>Occupation Food Service Management</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 05/03/00</p>	<p>Amount of Each Receipt This Period 500.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Ted Burke P.O. Box 85 Capitola, CA 95010</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Shadowbrook Restaurant</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 05/03/00</p>	<p>Amount of Each Receipt This Period 500.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Ruben Villavicencio 480 Apollo Street Suite A Brea, CA 92821</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer R & M Food Services, Inc.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p>	<p>Date (month, day, year) 05/03/00</p>	<p>Amount of Each Receipt This Period 1,000.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Jim Sellers P.O. Box 14636 Oklahoma City, OK 73116-3010</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Sellers Marketing Co., Inc.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p>	<p>Date (month, day, year) 05/03/00</p>	<p>Amount of Each Receipt This Period 1,000.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Wayne Reeves 121 E. 19th Street Anniston, AL 38201</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Manna Enterprises, Inc.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 2,000.00</p>	<p>Date (month, day, year) 05/05/00</p>	<p>Amount of Each Receipt This Period 2,000.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Mike Jensen 2216 N. Dodge Street Iowa City, IA 52240</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Group 6 Hospitality</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 05/05/00</p>	<p>Amount of Each Receipt This Period 500.00</p>

SUBTOTAL of Receipts This Page (optional) 6,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 3 OF 7
FOR LINE NUMBER 11 a

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NAME OF COMMITTEE (In Full)
National Restaurant Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Pete Mihajlov 3001 Hennepin Avenue Suite 301A Minneapolis, MN 55400	Parasola Restaurant Holdings, Inc.	05/05/00	2,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 2,500.00	
George W. McKerrow Jr. 8215 Roswell Road Bldg. 500 Atlanta, GA 30360-2887	RARE Hospitality, Inc., We're Cookin, Inc.	05/05/00	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 500.00	
David Egan 4403 SW 3rd St Oklahoma City, OK 73108-1026	Applewoods Restaurant	05/05/00	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Director, Operations	Aggregate Year-to-Date > \$ 500.00	
Ted Balestreni 765 Wave Street Monterey, CA 93940-1016	Sardine Factory, Inc.	05/06/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 1,000.00	
Michael E. Hurst 1900 S.E. 15th Street Fort Lauderdale, FL 33316-3097	15th Street Fisheries	05/08/00	2,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 2,500.00	
Christina Stubbs 4403 SW 3rd. Street Oklahoma City, OK 73108-1019	Applewoods, Inc.	05/08/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 1,000.00	
Jackie Trujillo 159 First Street Suite 212 Los Altos, CA 94022-2807	Harman Management Corp.	05/08/00	1,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 1,500.00	

SUBTOTAL of Receipts This Page (optional) **9,500.00**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Deleted Summary Page

PAGE 4 OF 7
FOR LINE NUMBER 11 a 1

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NAME OF COMMITTEE (in Full)
National Restaurant Association Political Action Committee

<p>A. Full Name, Mailing Address and ZIP Code Norman Sewing 3949 Lindell Boulevard St. Louis, MO 63109</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Salad Bowl Cafeteria, Inc.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 05/08/00</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Van Eure P.O. Box 6357 Raleigh, NC 27628</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer The Angus Barn Restaurant</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p>	<p>Date (month, day, year) 05/12/00</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>C. Full Name, Mailing Address and ZIP Code David Cortez 218 Produce Row San Antonio, TX 78207-4554</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer MTC, Inc.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 2,500.00</p>	<p>Date (month, day, year) 05/12/00</p>	<p>Amount of Each Receipt this Period 2,500.00</p>
<p>D. Full Name, Mailing Address and ZIP Code James A. Collins 6101 W. Centinela Ave. Suite 100 Culver City, CA 90230-6337</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Sizzler International, Inc.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 5,000.00</p>	<p>Date (month, day, year) 05/12/00</p>	<p>Amount of Each Receipt this Period 5,000.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Harold Pollin 8235 N.E. Airport Way Portland, OR 97220-1353</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Pollin Restaurants-Canyon Inc.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 05/12/00</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>F. Full Name, Mailing Address and ZIP Code D. Peter Keller One Convent Road Morristown, NJ 07960-6982</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Rod's 1890's Restaurant</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date (month, day, year) 05/12/00</p>	<p>Amount of Each Receipt this Period 300.00</p>
<p>G. Full Name, Mailing Address and ZIP Code George Cortez 200 East Myrtle San Antonio, TX 78212</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer MTC, Inc.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 2,500.00</p>	<p>Date (month, day, year) 05/12/00</p>	<p>Amount of Each Receipt this Period 2,500.00</p>

SUBTOTAL of Receipts This Page (optional) 12,050.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 5 OF 7
FOR LINE NUMBER 11 a 1

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NAME OF COMMITTEE (in Full)
National Restaurant Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code Wade Avondoglio 350 Andover -Sparta Road Andover, NJ 07821-5016	Name of Employer Perona Farms	Date (month, day, year) 05/22/00	Amount of Each Receipt This Period 500.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code Harris H. Rusitzky 1 Grova Street Suite 201D Pittsford, NY 14534-1300	Name of Employer The Greening Group	Date (month, day, year) 05/22/00	Amount of Each Receipt This Period 500.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code Xayler Teixeira 2020 Naaman's Road Wilmington, DE 19810-2655	Name of Employer Harry's Savoy Grill	Date (month, day, year) 05/22/00	Amount of Each Receipt This Period 250.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code David Williams 2280 S. Main Street Salt Lake City, UT 84116-2629	Name of Employer HB Boys LC/dba Burger King	Date (month, day, year) 05/22/00	Amount of Each Receipt This Period 500.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code Julie Flik 3 International Drive Rye Brook, NY 10573-1058	Name of Employer Compass Group/North American Division	Date (month, day, year) 05/22/00	Amount of Each Receipt This Period 1,000.00
	Occupation Executive	Aggregate Year-to-Date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code Bill Hyde 3321 Hessmer Metairie, LA 70002-4726	Name of Employer Ruth's Chris Steak House	Date (month, day, year) 06/24/00	Amount of Each Receipt This Period 1,200.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 1,200.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code Ralph Buchanan, Jr. 3007 Hudson-Aurora Road Hudson, OH 44236-2423	Name of Employer Buchanan Industries	Date (month, day, year) 05/24/00	Amount of Each Receipt This Period 250.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional) **4,200.00**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE **6** OF **7**
FOR LINE NUMBER **11 a i**

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
National Restaurant Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Horace Divine 2030 East Evans Avenue Denver, CO 80208 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	University of Denver Occupation Restaurateur	05/24/00	250.00
Aggregate Year-to-Date > \$ 250.00			
Jack C Maier 9235 Shawnee Run Road Cincinnati, OH 45243-2823 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Frisch's Restaurants Occupation Restaurateur	05/24/00	250.00
Aggregate Year-to-Date > \$ 250.00			
Richard W. Kubach Jr. 1501 Snyder Avenue Philadelphia, PA 19145 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Melrose Diner, Inc. Occupation Restaurateur	05/24/00	5,000.00
Aggregate Year-to-Date > \$ 5,000.00			
Denise Marie Fugo 1400 West 10th Street Cleveland, OH 44113-1215 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Sammy's Occupation Restaurateur	05/24/00	1,000.00
Aggregate Year-to-Date > \$ 1,000.00			
Florence Jaramillo P.O. Box 11 Chimayo, NM 87522-0011 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Restaurante Rancho de Chimayo Occupation Restaurateur	05/24/00	1,000.00
Aggregate Year-to-Date > \$ 1,000.00			
Cynthia Dykes 22515 SE H K Dodgen Loop Temple, TX 76802-8701 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Action World Bowl Center Occupation Restaurateur	05/24/00	250.00
Aggregate Year-to-Date > \$ 250.00			
Gary Gerard 508 North Street New Harmony, IN 47631-0581 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Red Geranium Enterprises Occupation Restaurateur	05/24/00	1,000.00
Aggregate Year-to-Date > \$ 1,000.00			

SUBTOTAL of Receipts This Page (optional)	8,750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 7 OF 7
FOR LINE NUMBER 11 a i

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NAME OF COMMITTEE (In Full)
National Restaurant Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code Craig Reed 1 Luke Avenue Colorado Springs, CO 80901	Name of Employer The Broadmoor Hotel	Date (month, day, year) 05/24/00	Amount of Each Receipt this Period 325.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 325.00	
B. Full Name, Mailing Address and ZIP Code Lee Gulpepper 341 South Pickett Street Alexandria, VA 22304-4746	Name of Employer National Restaurant Association	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 100.00 (\$50.00 Biweekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Association Executive	Aggregate Year-to-Date > \$ 250.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional) **425.00**

TOTAL This Period (last page this line number only) **47,650.00**

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 1 OF 1
FOR LINE NUMBER 15

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NAME OF COMMITTEE (In Full)
National Restaurant Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code Internal Revenue Service PO Box 148195 Austin, TX 78714	Name of Employer Tax Refund Occupation	Date (month, day, year) 05/01/00	Amount of Each Receipt this Period 519.22
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 519.22		
B. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
C. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional) **519.22**

TOTAL This Period (last page this line number only) **519.22**

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 1 OF 1
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
National Restaurant Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code Crestar Bank NA Post Office Box 26150 Richmond, VA 23260-6150	Name of Employer Interest Earned	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		05/31/00	239.00
B. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code		Aggregate Year-to-Date > \$ 1,165.91	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Name of Employer	Date (month, day, year)
D. Full Name, Mailing Address and ZIP Code		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code		Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Name of Employer	Date (month, day, year)
G. Full Name, Mailing Address and ZIP Code		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional) 239.00

TOTAL This Period (last page this line number only) 239.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 1 OF 1
FOR LINE NUMBER 23

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
National Restaurant Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Voided 02/14/00 Contribution	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Giuliani 250 Broadway Suite 2104 New York, NY 10007	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	05/24/00	-5,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	-5,000.00
TOTAL This Period (last page this line number only)	-5,000.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt <i>6-19-02</i>
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked <hr/> and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>JMS</i> PREPARER	<i>6-19-02</i> DATE PREPARED